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FACSIMILE COVER SHEET

March 22, 2005

Receiver: Examiner John M. Hotaling II
USPTO

FAX # : 703-872-9306

Sender: Tomika D. Thomas, Patent Secretary to:
DAVID P. OLYNICK

Our Ref. No.: IGT1P073/P-229
Appln. No.: 09/338,286

Re: Notice of Appeal

Pages Including Cover Sheet(s): 3

MESSAGE:

Please charge the required fees to facilitate filing to Deposit Account No. 500388 (IGT1P073). Should you have any questions or need further information, please do not hesitate to contact our office.

CONFIDENTIALITY NOTE

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Snow et al.

Attorney Docket No.: IGT1P073/P-229

Application No.: 09/338,286

Examiner: John M Hotaling II

Filed: June 22, 1999

Group: 3713

Title: Processing Platform for a Gaming Machine

CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is being transmitted via facsimile to the U.S. Patent and Trademark Office, Attention: Examiner J. Hotaling at facsimile telephone number (703) 872-9306 on March 22, 2005.

Signed: 

Tomika Thomas

NOTICE OF APPEAL

Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Applicant hereby appeals to the Board of Appeals from the decision of the Primary Examiner mailed December 8, 2004 finally rejecting Claims 10,11,15,16 and 20-24.

The item(s) checked below are appropriate:

Appeal Fee: ☐ \$250.00 (Small Entity) ☒ \$500.00 (Large Entity)

The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply:

☒ Applicant petitions for an extension of time under 37 CFR 1.136 (fees: 37 CFR 1.17(a)-(d)) for the total number of months checked below:

<u>Months</u>	<u>Large Entity</u>	<u>Small Entity</u>
<input checked="" type="checkbox"/> one	\$120.00	\$ 60.00
<input type="checkbox"/> two	\$450.00	\$225.00
<input type="checkbox"/> three	\$1,020.00	\$510.00

If an additional extension of time is required, please consider this a petition therefor.

☐ An extension for _____ month(s) has already been secured and the fee paid therefor of \$_____ is deducted from the total fee due for the total months of extension now requested.

☐ Applicant believes that no extension of time is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.

Total Fee Due

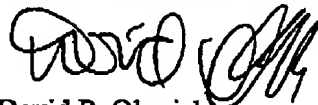
Notice of Appeal Fee	\$500.00
Extension Fee (if any)	\$120.00
Total Fee Due	\$620.00

☐ Enclosed is Check No. _____ in the amount of \$_____.

☒ Please charge the required fees to facilitate filing (or credit any overpayment) to Deposit Account No. 500388, (Order No. IGT1P073).

Respectfully submitted,

BEYER WEAVER & THOMAS, LLP



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